CMS Manual System

Pub 100-08 Medicare Program Integrity

Transmittal 145

Department of Health & Human Services (DHHS)

Centers for Medicare & Medicaid Services (CMS)

Date: MARCH 31, 2006 Change Request 5019

SUBJECT: Eliminate the Use of Surrogate UPINs (OTH000) on Medicare Claims

I. SUMMARY OF CHANGES: This CR rescinds CR 4177, Transmittal 752, which eliminated the use of the surrogate UPIN OTH000 on claims submitted by billers, suppliers, physicians and non-physician practitioners.

NEW/REVISED MATERIAL

EFFECTIVE DATE: April 1, 2006

IMPLEMENTATION DATE: April 3, 2006

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	

III. FUNDING:

No additional funding will be provided by CMS; cntractor activities are to be carried out within their FY 200 operating budgets.

IV. ATTACHMENTS:

One-Time Notification

*Unless otherwise specified, the effective date is the date of service.

Attachment – One-Time Notification

Pub. 100-08 Transmittal: 145 Date: March 31, 2006 Change Request 5019

SUBJECT: Eliminate the Use of Surrogate UPINs OTH000 on Medicare Claims

I. GENERAL INFORMATION

A. Background: Currently, durable medical equipment suppliers, physicians and non-physician practitioners are allowed to bill for diagnostic, radiology, consultation services and equipment with the use of Surrogate Unique Physician Identification Numbers (UPIN). CR 4177 directed contractors to no longer accept the Surrogate UPIN (OTH000) on Medicare claims submitted by billers, suppliers, physicians and non-physician practitioners

The CMS is rescinding CR 4177 due to the potential for adverse impact to providers billing the program. Contractors can continue to use Surrogate UPINs OTH000 for submitted claims and other internal purposes.

B. Policy: Section 1833(q) of the Social Security Act requires that all physicians that meet the §1861(r) definition of a physician must have a UPIN and <u>all</u> claims for services ordered or referred by one of these physicians include the names and UPINs of the ordering/referring physician.

II. BUSINESS REQUIREMENTS

[&]quot;Should" denotes an optional requirement

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		F I	R H H I	C a r r i e r	D M E R C	Sha Mai F I S		Systemers V M S	С	Other
5019.1	Contractors shall discontinue all work to eliminate the use of OTH000 in claims processing. Contractors shall continue to use surrogate UPIN OTH000 for submitted claims and other internal purposes.	X	X	X	X	X	X	X	X	

[&]quot;Shall" denotes a mandatory requirement

III. PROVIDER EDUCATION

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
T (MINOCI		FI	R H H I	C a r r i e	D M E R C	Sha	ired S intain		С	Other
5019.2	A provider education article related to this instruction will be available at www.cms.hhs.gov/medlearn/matters shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin and incorporated into any educational events on this topic. Contractors are free to supplement Medlearn Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.	X	X	X	X	X	X	X	X	

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: April 1, 2006

Implementation Date: April 3, 2006

Pre-Implementation Contact(s): Gerald Wright

(410) 786-5798

Post-Implementation Contact(s): Your regional

office contact

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating

budgets.

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